

In re Application of: Paul M. Tsou, M.D.
Serial No.: 10/749,457
Filed: December 31, 2003
For: Minimal Access Apparatus for Endoscopic Spinal Surgery
Group Art Unit: 3732
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Amendments to the Drawings

The attached sheet of drawings includes changes to Figures 1 through 8 to present the drawings in a more formal form acceptable to the Office.

Attachment: Replacement Sheet

Remarks

In the specification, the paragraphs [0005], [0006], [0007], [0009], [0030], and [0031] have been amended to correct minor editorial problems. Paragraphs [0026] and [0048] have been amended to reflect the issuance of the patent application previously referred to.

In response to the Office Action dated, October 20, 2006, Applicant has amended Figures 1 through 8 of the original application with formal drawings as required by the Examiner.

In response to the Office Action dated October 20, 2006, Applicant has amended the claims to place them in better condition for allowance. It is believed that the current amendments the claims more accurately define the invention and are consistent with the scope of the invention as disclosed.

Art-Based Rejections

In the Office Action, claim 1 was rejected under 35 U.S.C. 102(e) as being anticipated by Cragg (USPN 6,558,386). The Applicant respectfully submits that the claims are patentable in light of the clarifying amendments above and the arguments below.

The system disclosed in Cragg requires the use of a drill to bore axially in a cephalad-caudal direction through vertebral bodies before implanting a spinal implant. This procedure is significantly more invasive than the present invention and would presumably result in greater trauma to surrounding tissue. Cragg is the type of invasive prior art procedure the present invention seeks to avoid. Furthermore, Cragg by its claims is limited to implanting spinal implants.

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The present invention does not require axial boring through vertebral bodies, bone, or other matter. It merely requires a minor incision in the soft tissue, through which one can access the annulus and disc space. This is not limited to or required to be done axially, but can be performed at an angle relative to the body frontal plane in line with the disc inclination.

Conclusion

It is submitted that this application is now in good order for allowance and such allowance is respectfully solicited. Should the Examiner believe that there are matters relating to this application remaining that can be resolved in a telephone interview, the Examiner is urged to call the Applicants' undersigned attorney.

Respectfully submitted,

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